

STATE OF MAINE
DEPARTMENT OF HUMAN SERVICES
BUREAU OF ELDER AND ADULT SERVICES
442 CIVIC CENTER DRIVE
11 STATE HOUSE STATION
AUGUSTA, MAINE
04333-0011

John Elias Baldacci
GOVERNOR

NURSING FACILITY PAYMENT RESEARCH FORM

Date:

Nursing Facility Name:

Address:

Phone#:

Fax#:

Contact Person:

Member Name:

MaineCare Number:

Social Security:

Assessment Date:

Assessment Due Date:

Payment Dates in Question: From to

Facility Request/Problem

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Please submit copies of pertinent information to support your request. DO NOT send copies of rejected claims. Fax to 287-9231 Click **HERE to reset form**

